FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Coction 16 Form 4 or Form F		O TTTLE TOTAL

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Lapointe Gregg Anthony						2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [QSC]									ck all applic Directo	cable) or	ig Pers	son(s) to Iss 10% O Other (s	vner
(Last) 3260 WI	(F HIPPLE RC	•	(Middle)			Date 0		Trans	saction (Month/Day/Year)							Officer (give title below)		below)	эрсспу
(Street) UNION (City)			94587 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)					
		Tak	ole I - Non	-Deriv	/ativ	e Se	curities	s Ac	quired, I	Dis	osed o	of, or Be	nefic	cially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Code (I	Transaction Disposed Of Code (Instr. 5)			ties Acquired (A) or I Of (D) (Instr. 3, 4 an			nt of s ally following	Form (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) oi (D)	Pr	rice Reported Transact (Instr. 3 a		ion(s)			(111511.4)
			Table II - D						,			or Bend ble secu		•	Owned			·	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		expiration Pate	Title	Amo or Num of Shai	ber					
Stock Option (Right to Buy) ⁽¹⁾	\$0.65	06/29/2005			A		25,000		(2)	0	6/28/2015	Common Stock	25,0	000	\$0.65	25,00	0	D	

Explanation of Responses:

- 1. Options granted under the Questcor Pharmaceuticals, Inc. 2004 Non-Employee Directors' Equity Incentive Plan.
- 2. Options vest monthly over 48 months from the date of the grant.

/s/ Gregg Anthony Lapointe

07/01/2005

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.